UNITED STATES DISTRICT COURT

for the

	Northern District of Ohio						
	•						
John Horan,	et al.						
Plaintiff)						
V.))	Civil Action No. 1:18-cv-2054					
University Hospitals Health	System, Inc., et al.						
Defendant)						
SUMMONS IN A CIVIL ACTION							
To: (Defendant's name and address)	University Hospitals Health S c/o Janet L. Miller, Statutory 3605 Warrensville Center Ro Shaker Heights, Ohio 44122	Ågent oad					
A lawsuit has been filed	d against you.						
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney,							
whose name and address are:	Sean H. Sobel Sobel, Wade & Mapley, LLC 2460 Fairmount Boulevard, S Cleveland, Ohio 44106						
If you fail to respond, ju You also must file your answer		ntered against you for the relief demanded in the complaint.					
		SANDY OPACICH, CLERK OF COURT					
Date:		Signature of Clerk or Deputy Clerk					

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Civil Action No. 1:18-cv-2054

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (nat	me of individual and title, if any)					
was re	ceived by me on (date)	·					
	☐ I personally served	I the summons on the individual at	(place)				
			on (date)	; or			
	☐ I left the summons	at the individual's residence or us					
		f suitable age and discretion who resid	des there,				
	on (date), and mailed a copy to the individual's last known address; or						
		ons on (name of individual)			, who is		
	designated by law to accept service of process on behalf of (name of organization)						
			on (date)	; or			
	☐ I returned the sum	mons unexecuted because			; or		
	☐ Other (specify):						
	My fees are \$	for travel and \$	for services, for a total of \$				
I declare under penalty of perjury that this information is true.							
	i deciare under penan	y or perjury that this information i	s true.				
Date:							
Date.			Server's signature				
	Printed name and title						
			Server's address				

Additional information regarding attempted service, etc: